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PATENT  
Attorney Docket No. BLS-004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Crosbie  
SERIAL NO.: 09/911,092 GROUP NO.: 2131  
FILED: July 23, 2001 EXAMINER: Not yet assigned  
TITLE: Method and System for Enabling Seamless Roaming in a Wireless Network

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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ASSOCIATE POWER OF ATTORNEY

Sir:

An associate power of attorney is hereby granted to:

NAME	REG. NO.
Andrew F. Abramson	52,538

in connection with the above-identified patent application.

Please continue to direct all correspondence relating to the above application to:

Patent Administrator  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110

Date: April 28, 2004  
Reg. No. 41,059

Tel. No.: (617) 248-7176  
Fax No.: (617) 248-7100

3049903

Respectfully submitted,

Ira V. Heffan  
Attorney for Applicant  
Testa, Hurwitz, & Thibault, LLP  
High Street Tower  
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Boston, Massachusetts 02110



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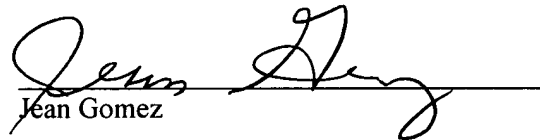
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**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 29 day of April, 2004.

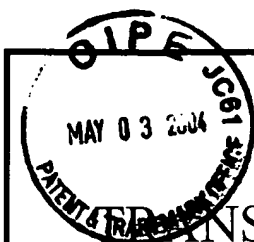
  
Jean Gomez

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith is/are:

1. Transmittal Form (1 pg.);
2. Sixth Supplemental Information Disclosure Statement (2 pgs.);
3. Form PTO - 1449 (1 pg.);
4. Copy of Cited Reference A50;
5. Associate Power of Attorney (1 pg.); and
6. a return receipt postcard.



# TRANSMITTAL FORM

Application Serial Number	09/911,092
Filing Date	July 23, 2001
First Named Inventor	Crosbie
Group Art Unit	2131
Examiner Name	Not yet assigned
Attorney Docket No.	BLS-004
Patent No.	Not applicable
Issue Date	Not applicable

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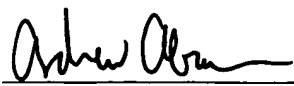
## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Status Inquiry
<input checked="" type="checkbox"/> Sixth Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copy of IDS Citation A50	<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
	<input type="checkbox"/> Small Entity Statement	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
	<input type="checkbox"/> CD(s) for large table or computer program	<input checked="" type="checkbox"/> Associate Power of Attorney
	<input type="checkbox"/> Amendment After Allowance	
	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	

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## SIGNATURE BLOCK

Respectfully submitted,  
  
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